

# Retail Food Inspection Report

Floyd County Health Department


Telephone (812) 948-4726

|  |  |   |                               |
|--|--|---|-------------------------------|
| <b>Establishment Name</b><br>LEGEND'S CAFE LLC                     | <b>Telephone Number</b><br>Est 812-920-0786<br>Own   | <b>Date of Inspection</b><br>05/05/2022   | <b>ID#</b>                    |
| <b>Address</b><br>2602 CHARLESTOWN RD, NEW ALBANY IN 47150         |  |   |                               |
| <b>Owner</b><br>JEREMY CLARY                                       | <b>Purpose</b><br><input checked="" type="checkbox"/> Routine<br><input type="checkbox"/> Follow-up<br><input type="checkbox"/> Complaint<br><input type="checkbox"/> Pre-Operational<br><input type="checkbox"/> Temporary<br><input type="checkbox"/> HACCP<br><input type="checkbox"/> Other (list) | <b>Follow Up</b>  | <b>Released</b><br>05/05/2022 |
| <b>Owner's Address</b><br>2602 CHARLESTOWN RD NEW ALBANY, IN 47150 |  | <b>Menu Type</b><br>1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> |                               |
| <b>Person in Charge</b><br>STONEY KIETH                            |  |   |                               |
| <b>Responsible Person's Email</b><br>STONYKEITH812@GMAIL.COM       |  |   |                               |
| <b>Certified Food Handler</b><br>DAMON KIETH                       |  |   |                               |

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

| Section # | C | NC | R | Narrative   | To Be Corrected |
|-----------|---|----|---|---|-----------------|
| 415       | X |    |   | Observed mice dropping near back door. Observed dead mouse in utility closed containing hotwater heater. Clean areas. Treat for mice. Any traps or bait used should be enclosed. Contact certified pest operator if issue persists. | today           |
| 218       |   | X  |   | Observed mop sink to be damaged and not sloping towards drain.  | 3 days          |
| 239       |   | X  |   | Observed single service boxes near prep cooler to not be inverted.  | corrected       |
| 295       |   | X  |   | Observed slicer to have dried food debris.  | today           |
| 297       |   | X  |   | Observed area behind freezer's condenser to be in need of cleaing.  | 1 day           |
| 430       |   | X  |   | Observed a hole in the concrete floor around floor drain in kitchen.  | 2 weeks         |
| 352       |   | X  |   | Observed no self-closer on men's restroom door.   | 2 weeks         |
| 413       |   | X  |   | Observed hole in foam around door frame at back exterior door. Hole may be an entry way for pests. Observed back door propped open. If back door is to to remain open for air flow a screen door must be installed.                 | 2 weeks         |

**Summary of Violations**      C   1        NC   7        R   0  

|   |  |
|---|--|
| Received by (name and title printed):<br>STONEY KIETH | Inspected by (name and title printed):<br>Thomas Snider CFS  |
| Received by (signature):                              | Inspected by (signature):<br> |
| cc:   | cc:  |